



Mental Health Update

June 23, 2006

CONSUMER-RUN CAMP OFFERS CHANCE FOR MENTAL HEALTH NETWORKING, EDUCATION

From June 12 to 16 Elfin Lake in Wallingford, Vermont, was the location for a unique camping experience for individuals who have experienced mental illness firsthand. Kitty Gallagher, someone who has struggled with mental illness and receives services at her local community mental health agency, organized the event as a way to bring other mental health "consumers" together from around the state to share stories and support, network, advocate, and have fun. Kitty worked with Vermont Psychiatric Survivors, a statewide organization run by and for mental health consumers, to advertise and organize the event. People attending the camp had access to meals three times a day (campers were charged \$1 per meal), nightly entertainment, and daily meetings with different state mental health leaders, including Paul Blake, Deputy Commissioner of Mental Health, and Representative Anne Donahue, to discuss current issues facing mental health consumers in Vermont. Most of the participants were individuals who are currently receiving mental health services from their local community mental health agency. Over 90 people attended during the week.

FUTURES PROJECT

Housing

"If we had one million dollars to spend on housing, what would we do with it?" Chair Ken Liberto posed this question to the newly convened Futures Housing Work Group this week. The group will work to understand funding mechanisms and program regulations related to housing development. Work group members include consumers, housing program managers, housing authority administrators, and peer support program leaders. They identified a number of key characteristics of successful housing programs:

- flexibility in program requirements and funding
- rent subsidy
- peer supports
- the need for a variety of housing options
- personal choice

All agreed on the fundamental importance of housing in the context of the comprehensive Futures Plan. Significant enhancement of the housing contingency fund is a major priority.

Crisis Beds

Planning for the development of ten new hospital diversion beds to be phased in over an 18-month period, beginning in January 2007 with four beds, is the focus of the Crisis Bed Development Work Group. The group has met four times, visiting both the ASSIST program in Burlington and Home Intervention in Barre. In an effort to learn about the similarities and differences among the crisis bed programs currently in place, the group plans to visit Battelle House in Bennington and Alternatives in Bellows Falls. Input from CRT and Emergency Services directors through surveys will provide the data necessary to identify not only the priority locations for additional crisis bed capacity but also the unmet needs of existing capacities. When completed, the surveys will provide a basis for developing programmatic and fiscal recommendations to optimize resources for the ten additional beds in the Futures Plan.

CON Process Begins

The Vermont Department of Health, Division of Mental Health, filed a Letter of Intent on June 19, 2006, with the Department of Banking, Insurance, Securities and Health Care Administration (BISHCA) as the first formal step in gaining approval for conceptual plans to develop a new clinical facility at Fletcher Allen Health Care in Burlington, and enhancements at Rutland Regional Medical Center and the Brattleboro Retreat.

The Conceptual Certificate of Need is a preliminary process by which the applicant gains approval of the general project concepts, including need, in order to conduct a detailed planning process. If the Conceptual CON is granted, we will develop a second, more detailed CON application that will address, among other items, location, building design and costs.

Click to view Letter of Intent

http://healthvermont.gov/mh/futures/documents/CON_letter_of_intent.pdf

City of Burlington

Mayor Kiss, city department heads from Fire, Police, Planning and Zoning, Economic Development, City Council, and Sharon Bushor met with Fletcher Allen Health Care and state officials to discuss the concept of locating new, psychiatric inpatient beds on the Fletcher Allen campus. The city offered project staff a list of questions regarding governance, public safety, community impact, design and development, and program characteristics (see new postings for the questions). We will develop written responses to the questions, some in the near term and others over time as the project develops.

Outreach to Neighborhood Planning Assembly

An outreach letter and answers to previously asked questions was distributed to Ward 1, the neighborhood immediately adjacent to Fletcher Allen Health Care (see new postings). This neighborhood is directly impacted by any development on the Fletcher Allen Campus. Even so, when plans called for the relocation of the psychiatric inpatient service to the Fanny Allen campus, the Ward 1 neighbors took a stand on integration. We will work closely with this assembly and their elected representatives to develop a plan that is responsive to their concerns and that assures Vermonters a state-of-the-art inpatient program.

Public Hearing Dates Set

There will be a public hearing on July 13th at 7:00 pm in the Mater Christi School, 100 Mansfield Avenue, Burlington. In addition, a second public meeting will be held on July 20 in South Burlington (location TBA). In addition to presenting information about the Futures Plan and learning about residents' concerns, we will be seeking volunteers to serve on a task force to address issues raised in the meeting.

Bed Capacity Recommendations

Clinical leaders gathered to develop a recommendation about how many psychiatric inpatient beds Vermont will need in 2016 to replace the state hospital (see recent postings). They considered the actuarial study, the Futures Plan, and drew on their collective wisdom about the capacities and pressures on the current system of care. They strongly emphasized the importance of viewing the inpatient and community services as a single system characterized by interdependence. The stronger the capabilities of the community system the fewer inpatient beds we will need.

In addition, they articulated a widely held sense that the current system (both inpatient and community) is saturated and that new capacities and more consistent funding are needed. This is especially true for case management, residential and adult outpatient services. They offered the following recommendation, consistent with the actuarial findings:

- 50 beds overall; 32 or more with FAHC; 8 with RRMCC and the remaining balance at the Retreat.
- Full implementation of the Futures Plan including the, as yet unfunded, recommendations for MH services in Corrections and Adult Outpatient (*reference Secretary Charlie Smith's recommendations to the Legislature 2/4/05*); and the commitment to fully fund the community system (sustainability).

At their June 12th meeting, the Futures Advisory Committee (see recent postings) reviewed this recommendation and offered individual options about bed capacity. The advisory committee had a greater range of opinions; however, the most frequently suggested numbers ranged from 50 – 54 beds.

Secretary LaWare is very interested in receiving, for her careful consideration, any and all input as she prepares to make the bed capacity decision relating to the futures project.

Legislative Oversight Committee

The Mental Health Joint Oversight Committee met this week to assess progress on the Futures Plan. (see new postings for the PowerPoint presentation)

VERMONT STATE HOSPITAL CENSUS

The Vermont State Hospital Census was 49 as of midnight Wednesday night. The average census for the past 45 days was 48.6.